JUL 1 1 2006

	CERTIFICATE OF FACS	BIMILE TRANSMISSION
I hereby certify that the Office on July 11, 20	nis correspondence is being facsimile 06, to the Group fax number (811)27	transmitted to the United States Patent and Trademark 8300 to 100 attention of Examiner Stacey Chen.
		PTO/SB/22 (08-03
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					PTO/\$8/22 (08			
PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)					Docket No. (Optional)			
				<u> </u>	29025.0001			
	In re Application of Arlene RAMSINGH, et al.							
	Application Number			Filed				
	09/879,572			June 12, 2001				
	For: COXSACKIEVIRUS B4 EXPRESSION VECTORS AND USES THEREOF							
	Art Unit	1648	Exam	iner	Stacey Chen			
This is a request under the provisions identified application.	s of 37 CFR 1.130	B(a) to extend the	period fo	r filing a re	ply in the above			
The requested extension and approp	riate non-small-e	ntity fee are as foll	ows (che	eck time pe	riod desired):			
One month (37 CFR 1.17			•	\$				
Two months (37 CFR 1.17(a)(2))								
X Three months (37 CFR 1.17(a)(3))					1020.00			
Four months (37 CFR 1.17(a)(4))					1020.00			
Five months (37 CFR 1.17(a)(5))					<del></del>			
X Applicant claims small entity st		R 1 27 Therefore	the fee	\$	Nove above is			
reduced by one-half, and the n	esulting fee is: \$	510.00		amount Si	lown above is			
A check in the amount of the fe	ee is enclosed.							
Payment by credit card. Form	PTO-2038 is atta	iched.						
X The Director has already been	authorized to cha	arge fees in this ap	plication	to a Depo	sit Account.			
X The Director is hereby authorize								
overpayment, to Deposit Accou	unt Number	50-0911		•				
I have enclosed a duplicate cop								
l am the applicant/inventor.  assignee of record of the entire interest. See 37 CFR 3.71.								
Statement und	l of the entire inte ler 37 CFR 3.73(t	rest. See 37 CFR i) is enclosed. (Fo	3.71. m PTO	/SB/96\				
attorney or agent of								
X attorney or agent L					_			
Registration number			33,	949				
June 11, 2006			/					
Date				Signature				
(202) 498-7845 Telephone Number		<u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>		nmuel Livn				
NOTE: Signatures of all the inventors or assigne	es of record of the entir	e interest or their represe		or printed re required. So				
The same appearance, and below					The state of the s			
X Total of 1	forms are submitte							

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